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Fill in this information to identify your case:	
United States Bankruptcy Court for the: Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pá	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Lisa	
		First name	First name
	Write the name that is on your government-issued	M.	
	picture identification (for	Middle name	Middle name
	example, your driver's license or passport	Swinson	· · · · · · · · · · · · · · · · · · ·
	licerise or passport	Last name	Last name
	Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2	All other names you		
	have used in the last	First name	First name
	8 years		
	la alcala caca assaula d	Middle name	Middle name
	Include your married or maiden names.		
		Last name	Last name
		First name	First years
		First name	First name
		Middle name	Middle name
		Triadio nano	Wildele Hallie
		Last name	Last name
3.	Only the last 4 digits	XXX - XX- 2162	xxx - xx-
	of your Social Security number or	OR	OR .
	federal Individual		
	Taxpayer Identification number	9 xx - xx-	9 xx - xx-
	(ITIN)		

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D	ebtor 1 Lisa First Name	M. Swinson Middle Name Last Name	Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the last	Business name	Business name
	8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		5148 Zenith Parkway #2 Number Street	Number Street
		Machesney Park Illinois 61115 City State Zip Code	City State Zip Code
		Winnebago	Oity State Zip Gode
		County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
_		City State Zip Code	City State Zip Code
6.	Why you are choosing this district	Check one:	Check one:
	to file for bankruptcy	Over the last 180 days before filing this petition, I ha lived in this district longer than in any other district.	lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. §§ 14	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)
		-	

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Debte	or 1 Lisa	M.	Swinson	Case number (if kr	own)
	First Name	Middle Name	Last Name		
Part :	2: Tell the Court Abo	ut Your Bankruptcy Case			
B a	he chapter of the ankruptcy Code you re choosing to file nder	Check one. (For a brief desc Bankruptcy (Form B2010)). A Chapter 7 Chapter 11 Chapter 12 Chapter 13			C. § 342(b) for Individuals Filing for opriate box.
	ow you will pay the ee	more details about how cashier's check, or more may pay with a credit of the company may pay with a credit of the company pay with a credit of the company pay with a credit of the company may be sufficiently as a company with a credit of the company may be sufficiently as a company with a credit of the company may be sufficiently as a company with a credit of the company with a credit of th	w you may pay. Typically ney order If your attorn card or check with a presin installments. If you char Filing Fee in Installments be waived (You may receptive to, waive your fee that applies to your fame, you must fill out the A	r, if you are paying the ley is submitting you printed address. noose this option, signts (Official Form 103 quest this option only se, and may do so or nily size and you are	the clerk's office in your local court for the fee yourself, you may pay with cash, ar payment on your behalf, your attorney and attach the <i>Application for</i> 3A). If you are filing for Chapter 7. By law, a sally if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official)
b	ave you filed for ankruptcy within the ast 8 years?	Ves. District District District	,	When	Case number Case number Case number
ca be sp fil ye pa	re any bankruptcy ases pending or eing filed by a pouse who is not ling this case with ou, or by a business artner, or by an ffiliate?	Ves. Debtor District Debtor District		When	Relationship to you Case number, if known Relationship to you Case number, if known
	o you rent your esidence?	✓ No. Go to line Yes. Fill out <i>Ini</i>	12.		o you want to stay in your residence? est You (Form 101A) and file it with

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M. Debtor 1 Lisa Swinson __ Case number (if known) First Name Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? $\overline{\mathbf{v}}$ No. I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1
 Lisa
 M.
 Swinson
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Lisa			Case number (if known)	
First Name		Last Name		
Part 6: Answer These Que 16. What kind of debts do you have?	estions for Reporting Purposes 16a. Are your debts primarily "incurred by an individual No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily money for a business or in No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you	consumer debts? Con primarily for a personal business debts? Busin nvestment or through th	, family, or household ness debts are debts t ne operation of the bu	d purpose." hat you incurred to obtain usiness or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	✓ No.			
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,00		25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$ \$10,000,001-\$ \$50,000,001-\$ \$100,000,000	-\$50 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$ \$10,000,001-\$ \$50,000,001-\$ \$100,000,000	-\$50 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below				
For you	correct. If I have chosen to file under Chof title 11, United States Code. under Chapter 7. If no attorney represents me an out this document, I have obtain	napter 7, I am aware that I understand the relief a d I did not pay or agree ned and read the notice	I may proceed, if eligavailable under each coto pay someone who required by 11 U.S.C	= ::
	both. 18 U.S.C. §§ 152, 1341, ★	tement, concealing prop case can result in fines u	perty, or obtaining mo	
	/s/ Lisa Swinson Signature of Debtor 1		Signature of Deb	tor 2
	Executed on 3/6/2017		Executed on	
	MM / DE	D / YYYY	_ACCUTED OIT _	MM / DD / YYYY

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Debtor 1 Lisa	M.	Swinson	Case number (if	known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed ur	nder Chapter 7, 11, 1	2, or 13 of title 11, United	ave informed the debtor(s) about d States Code, and have explained the also certify that I have delivered to the
If you are not	debtor(s) the notice req	uired by 11 U.S.C. §	342(b) and, in a case in v	vhich § 707(b)(4)(D) applies, certify that I
represented by an	` '			ules filed with the petition is incorrect.
attorney, you do not	· ·	, ,		·
need to file this page.	/s/ Dan Springer		Date	3/6/2017
	Signature of Attorney	for Debtor	M	M / DD / YYYY
	,			
	Dan Springer			
	Printed name			
	Springer Law			
	Firm name			
	2222 E State St.			
	Street			
	# 107			
	# 107			
	Rockford		Illinois	61104
	City		State	Zip Code
	Contact phone	8153124725	Email address	dspringerlaw@gmail.com
			-	
			Illinois	
	Bar number		State	

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Debtor 1 Lisa	М.	Swinson	Case number #f.	known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed un	der Chapter 7, 11, 12,	or 13 of title 11, United	ave informed the debtor(s) about d States Code, and have explained the Iso certify that I have delivered to the
If you are not represented by an attorney, you do not need to file this page.	debtor(s) the notice req	uired by 11 U.S.C. § 3- er an inquiry that the in	42(b) and, in a case in v formation in the sched Date	which § 707(b)(4)(D) applies, certify that I ules filed with the petition is incorrect. 3/4/2017 M / DD / YYYY
	Dan Springer Printed name Springer Law Firm name 2222 E State St.			
	Street # 107			
	Rockford		Illinois	61104
	City	-	State	Zip Code
	Contact phone	8153124725	Email address	dspringerlaw@gmail.com
	Bar number	· · · · · · · · · · · · · · · · · · ·		
	# 107 Rockford City Contact phone	8153124725	State Email address Illinois	Zip Code

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Lisa M. Swinson	Case No.	
	Debtor		(If known)
		Chapter	Chapter 7
	DISCLOSURE OF CO	MPENSATION OF ATTORNEY F	OR DEBTOR
	compensation paid to me within one year l	Bankr. P. 2016(b), I certify that I am the attorney for the abo before the filing of the petition in bankruptcy, or agreed to e debtor(s) in contemplation of or in connection w ith the	o be paid to me, for services
	For legal services, I have agreed to accept		\$500.00
	Prior to the filing of this statement I have r	received	\$500.00
	Balance Due		\$0.00
2.	The source of the compensation paid to m	ne was:	
	✓ Debtor	Other (specify)	
3.	The source of the compensation paid to m	e is:	
	✓ Debtor	Other (specify)	
4.	I have not agreed to share the above-d members and associates of my law firm	disclosed compensation with any other person unless the m.	ey are
[I have agreed to share the above-discle members or associates of my law firm. the people sharing in the compensatio	osed compensation with a other person or persons who a A copy of the agreement, together with a list of the name on, is attached.	are not es of
5. l	In return for the above-disclosed fee, I have	e agreed to render legal service for all aspects of the bank	ruptcy case, including:
6. I	By agreement with the debtor(s), the above	-disclosed fee does not include the following services:	
		CERTIFICATION	
	pertify that the foregoing is a complete stater(s) in this bankruptcy proceedings.	ement of any agreement or arrangement for payment to n	ne for representation of the
	3/4/2017	/s/ Dan Springer	
	Date	Signature of Attorney	
		Springer Law	
		Name of law firm	

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Debtor 1 Lisa First Name	M. Middle Name	Swinson Last Name	Case number (If known)	
Part 6: Answer These Qu	estions for Reporting Purpor	ses		
^{16.} What kind of debts do you have?	"incurred by an individ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primal	ual primarily for a pers rily business debts? <i>I</i> or investment or throu	sonal, family, or househol Business debts are debts t gh the operation of the bi	that you incurred to obtain usiness or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid the	oter 7. Do you estimate t	nat after any exempt proper to distribute to unsecured o	ty is excluded and administrative creditors?
18. How many creditors do you estimate that you owe?	☑ 1-49 □ 50-99 □ 100-199 □ 200-999	☐ 1,000-5, ☐ 5,001-10 ☐ 10,001-2	,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	☑ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$10,000, \$50,000,	01-\$10 million 001-\$50 million 001-\$100 million),001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
^{20.} How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,000, \$50,000,	01-\$10 million [001-\$50 million [001-\$100 million [0,001-\$500 million [\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below				
	correct. If I have chosen to file under of title 11, United States Coounder Chapter 7. If no attorney represents me a out this document, I have obt I request relief in accordance I understand making a false s	Chapter 7, I am aware de. I understand the re and I did not pay or actained and read the no with the chapter of tit statement, concealing y case can result in fin	that I may proceed, if elig lief available under each o gree to pay someone who btice required by 11 U.S.C le 11, United States Code property, or obtaining mo	e, specified in this petition.
	Signature of Debtor 1 Executed on 3/4/2017	, DD / YYYY	Signature of Deb Executed on	MM / DD / YYYY

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Fill in this info	mation to identify your c	980;			
Debtor 1	Lisa First Name	M. Middle Name	Swinson Last Name	-	
Debtor 2	II St I VOITE	MICOLE MAINE	Lastivallie		
(Spouse, if filing)	First Name	Middle Name	Last Name	— j	
United States E	Sankruptcy Court for the:	Northern	District of Illinois		
			(State)	_	
Case number (if known)				—]	
Official	Form 106De	C			Check if this is a amended filing
Declarat	ion About an	_ Individual Debi	or's Schedules		12/1
U.S.C. §§ 152, Part 1: Sign	1341, 1519, and 3571. Below				
Did you n	av or agree to nav some	one who is NOT an ettorn	ey to help you fill out bankr	untou forms?	
	ay or agree to pay some	one who is NOT all accom	oy to neip you im out punkt	aproy forms.	
✓ No					
Yes. 1	lame of person		Attach Bankruptcy Pel Signature (Official Fon	tition Preparer's Notice, Declaration, and m 119).	
Under pen	alty of perjury, I declare	that I have read the sum	mary and schedules filed wi	ith this declaration and	
	are true and correct.	\wedge			
🗶 /s/ Lisa S	winson L : L	· V	×		
Signature o	f Debtor 1		Signature o	f Debtor 2	

MM/DD/YYYY

Date 3/4/2017

MM/DD/YYYY

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Debtor 1	1 Lisa First Name	M. Middle Name	Swinson Last Name	Case number (#known)
	and the second state of the second se	an er sammann an ar	an destablishment of the first transfer demonstrates and a consequence of	
	thin 2 years before editors, or other pa	-	you give a financial statem	ent to anyone about your business? Include all financial institutions,
7	No			
	Yes. Fill in the de	tails below.		
			Date issued	
	Name		MM/DD/YYYY	-
	Number Street			
	City	State Zip Code		
Part 12:	Sign Below			
	nkruptcy case can			erty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signati	ire of Debtor 1		Signature of Debtor 2
	Date 3	3/4/2017		Date 3/4/2017
Did y	ou attach addition	al pages to Your Statement	of Financial Affairs for Indiv	iduals Filing for Bankruptcy (Official Form 107)?
	No Yes			•
Did y	ou pay or agree to	pay someone who is not an	attorney to help you fill out	bankruptcy forms?
∀ '	No			
	Yes, Name of person			Attach the Bankruptcy Petition Preparer's Notice,

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Debtor Lisa	M.	Swinson	Case number (if
First Name	Middle Name	Last Name	known)
art 2: List Your Unexpired	l Personal Property Leas	ses	
or any unexpired personal pro nformation below. Do not list r ssume an unexpired personal	'eal estate leases. Unexpire:	d leases are leases that :	Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
Describe your unexpired po	ersonal property leases		Will the lease be assumed?
Lessor's name:			☐ No ☐ Yes
Description of leased property:			Total Southern Control
Lessor's name:			No No
Description of leased property:			Yes
Lessor's name:			☐ No ☐ Yes
Description of leased property:			
Lessor's name:			☐ No ☐ Yes
Description of leased property:			
Lessor's name:			☐ No ☐ Yes
Description of leased property:			_
Lessor's name:	Mantanten om state attachet und de seur person en		☐ No ☐ Yes
Description of leased property:			—
Lessor's name;			□ No □ Yes
Description of leased property:			
3: Sign Below	and the second s	an ann a mar ann a sean an an an ann an ann an ann ann ann a	ega na manana menggaga kananana memengga kananangan ana kananangan ana kanananan menananan dan dan dan dan genjega
Under penalty of perjury, I dec property that is subject to an a	lare that I have indicated munexpired lease.	ny intention about any pr	operty of my estate that secures a debt and any personal
/s/ Lisa Swinson Signature of Debtor 1	- le l	×	
Date 3/4/2017 MM/DD/YYYY		_	3/4/2017 MM/DD/YYYY

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

та ге:	Debtor(s)	Case No.	
		Chapter	Chapter7
	VERIF	ICATION OF CREDITOR MAT	RIX
T? nowledge	he above named Debtors hereby ver e.	ify that the attached list of creditors is tru	ue and correct to the best of their
ale:	3/4/2017	/s/ Swinson, Lisa	m. L-h. L
		Swinson, Lisa M. Signature of Deb	

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Debtor '	Lisa First Name	M. Middle Name	Swinson Last Name	Case number	(If known)			
	clist Name	MIDDLE NAME	Last Name	Column A Debtor 1		Column B Debtor 2 or non-filing spo	ouse	
Do n		ation you contend that the amount r ct. Instead, list it here:	eceived was a benefit	\$0.00		\$0.00		
For y			\$0.00 \$0.00					
roi y	our spouse		30.00					
bene	fit under the Social Se	•		\$0.00		\$0.00		
amot paym intem	unt. Do not include an ients received as a vict	ources not fisted above. Speci y benefits received under the Si ilm of a war crime, a crime agai prorism. If necessary, list other s w.	ocial Security Act or ast humanity, or					
——Total	amounts from separa	to names if any		+\$0.00		+\$0.00	_	
i Qiai	amounts nom separa	te pages, ii aity.			} [
11. Cal each	culate your total cu	rrent monthly income. Add lin	es 2 through 10 for	\$3,339.15	+	\$ <u>0.00</u>	=	\$3,339.15
coli	umn. Then add the to	tal for Column A to the total for	Column B.		ĺ			
								Total current monthly income
Part 2:	Determine Wheth	ner the Means Test Applie	s to You					
	-	onthly income for the year. I	•					
		t monthly income from line 11.		(Copy fine	11 here ->		\$3,339.15
	· · · ·	mber of months in a year). ual income for this part of the fo	um.				12b.	X 12
120.	ine lesuit is your anni	da vicome for this part of the it	ти.				120.	\$40,069.80
13 Calcu	late the median fam	nily income that applies to yo	u. Follow these steps:					
Fill in 1	the state in which you	ı live.	Illinois					
Fill in 1	the number of people	in your household.	3					
Fill in t		ome for your state and size of					13.	\$75,454.00
		edian income amounts, go on					L.	
	do the lines compar	his list may also be available at t e?	the bankruptcy clerk's of	Tice.				
		an or equal to line 13. On the t	op of page 1, check box	x 1, There is no presumption	on of abu	ıse.		
14b. [Line 12b is more t	than line 13. On the top of pag ill out Form 122A-2.	e 1, check box 2, The p	resumption of abuse is de	termined	by Form 122A	-2.	
Part 3:	Sign Below							
By si	gning here, I declare u	under penalty of perjury that the	information on this stat	ement and in any attachm	ents is tr	ue and correct.		
	i	0 4 0						
×	/s/ Lisa Swinson	- he for	x					
Si	gnature of Debtor 1		 -	Signature of Debtor 2				
D	ate 3/4/2017		en for	Date 3/4/2017		•	ta/e	
	MM/DD/YYYY			MM/DD/YYYY				
		do NOT 棚 out or file Form 122 fill out Form 122A-2 and file it v						

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Fill in this infor	mation to identify your c	ase:		
Debtor 1	Lisa	M.	Swinson	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number (If known)				

	Check if	this	is	an
_	amende	d filii	ng	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$23,700.00
1c. Copy line 63, Total of all property on Schedule A/B	\$23,700.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$29,809.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$20,346.00
Your total liabilitie	\$50,155.00
Part 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,717.98

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Deb	otor 1 Lisa	M.	Swinson	Case number (if known)					
	First Name	Middle Name	Last Name						
Part	4: Answer These Qu	estions for Administrati	ive and Statistical Records	<u> </u>					
6. A	Are you filing for bankrupt	cy under Chapters 7, 11, or	13?						
[No. You have nothing t	o report on this part of the fo	rm. Check this box and submit the	his form to the court with your other scl	nedules.				
	Yes.								
7. V	What kind of debt do you h	ave?							
[mer debts are those incurred by a sill out lines 8-10 for statistical pu	an individual primarily for a personal, rposes. 28 U.S.C. § 159.					
	· •	marily consumer debts. Yo ith your other schedules.	u have nothing to report on this	part of the form. Check this box and su	bmit				
		our Current Monthly Income Form 122B Line 11; OR , Fo	e: Copy your total current month rm 122C-1 Line 14.	ly income from Official	\$3,339.15				
9.	Copy the following spec	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:							
	From Part 4 on Schedule	E/F, copy the following:		Total claim					
	9a. Domestic support obli	gations (Copy line 6a.)		\$0.00					
	9b. Taxes and certain other	er debts you owe the governr	ment. (Copy line 6b.)	\$0.00					
	9c. Claims for death or pe	rsonal injury while you were i	ntoxicated. (Copy line 6c.)	\$0.00					
	9d. Student loans. (Copy	ine 6f.)		\$0.00					
	9e. Obligations arising out		r divorce that you did not report a	sas \$0.00					
	9f. Debts to pension or pr	ofit-sharing plans, and other	similar debts. (Copy line 6h.)	\$0.00					

\$0.00

9g. Total. Add lines 9a through 9f.

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Fill in this	information to identify yo	our case:					
Debtor 1	Lisa	M.		Swinson			
Debtor 1	First Name	Middle Na	ame	Last Name			
Debtor 2 (Spouse, if fil	ing) First Name	Middle Na	am o	Last Name			
	- Thot Name			trict of Illinois			
United Sta	ites Bankruptcy Court for	the: Northern	DIS	(State)			
Case num (If known)	ber						
Officia	I Form 106A/E)					Check if this is an
		_					amended filing
Sched	dule A/B: Pro	perty					12/1
category v responsibl write your	where you think it fits be e for supplying correct name and case number	est. Be as complete an information. If more sp r (if known). Answer ev	nd accurate a pace is neede ery question		people are t to this fo	e filing together, both a orm. On the top of any a	re equally
				Real Estate You Own			
1. Do you	No. Go to Part 2	or equitable interest in	n any residen	ce, building, land, or simil	ar propert	y?	
	Yes. Where is the proper	tv?					
		•	What is the	property? Check all that app	oly.	Do not deduct secured	claims or exemptions. Put
1.1	Street address, if available	o or other description		mily home	•		red claims on Schedule D: ims Secured by Property.
	Street address, ii avallabii	e, or other description	Duplex o	r multi-unit building		Current value of the	Current value of the
				inium or cooperative		entire property?	portion you own?
			Land	tured or mobile home			
	Number Street			ent property		Describe the nature o	
	01-1-	7'- 0-1-	Timeshar Other	re		interest (such as fee s the entireties, or a life	
	City State	Zip Code				Ob 1 - 10 Hz - 1	
			Who has an	interest in the property?	Check	(see instructions)	mmunity property
			one. Debtor 1	anh			
			Debtor 2	•			
			\square	and Debtor 2 only			
			At least of	ne of the debtors and anoth	er		
				nation you wish to add abo	out this ite	m, such as local	
If you	own or have more than o	ne. list here:	property ide	ntification number:			
, , , ,		,	What is the	property? Check all that app	oly.		claims or exemptions. Put
1.2	Street address, if available	e, or other description	_ `	mily home			red claims on Schedule D: ims Secured by Property.
			ш '	r multi-unit building inium or cooperative		Current value of the	Current value of the
				tured or mobile home		entire property?	portion you own?
			Land				
	Number Street		Investme	ent property		Describe the nature o interest (such as fee s	
	City State	Zip Code	Timeshar Other	re		the entireties, or a life	
	- J	— ₋	Ш			Check if this is co	mmunity property
				interest in the property?	Check	(see instructions)	minumey property
			one. Debtor 1	only		Ц	
			Debtor 2	•			
				and Debtor 2 only			
			At least of	ne of the debtors and anoth	er		
				nation you wish to add abo entification number:	out this ite	m, such as local	

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Debtor 1	Lisa First Name	M. Middle Name	Swinson Last Name	_ Case numbe	r (if known)	_
	et address, if available, or ot nber Street State	her description	What is the property? Check all that a Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ano Other information you wish to add all property identification number:	Check one.	the amount of any secu Creditors Who Have Cla Current value of the entire property? Describe the nature of interest (such as fee s the entireties, or a life Check if this is co (see instructions)	imple, tenancy by e estate), if known.
	the dollar value of the po ve attached for Part 1. Wr	-	all of your entries from Part 1, includere.	ding any entrie	s for pages	
Do you ow you own th 3. Cars, va	hat someone else drives. If y ins, trucks, tractors, sport ut	equitable interestrou lease a vehicle,	t in any vehicles, whether they are r also report it on Schedule G: Executory cycles	-	-	
3.1	Make Model: Year: Approximate mileage: Other information:	GMC Sierra 2014 33000	Who has an interest in the propone. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community proposed to the	another	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$21700.00
3.2	Make Model: Year: Approximate mileage: Other information:		who has an interest in the propone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community prinstructions)	another	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the portion you own?

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JIOI I	Lisa First Name	M. Middle Name	Swinson Last Name	Case number	er (if known)	
3.3	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors Check if this is communinstructions)	ly s and another	the amount of any secu	claims or exemptions. Put ured claims on <i>Schedule D</i> aims Secured by Property. Current value of the portion you own?
3.4	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors Check if this is communinstructions)	ly s and another	the amount of any secu	claims or exemptions. Put irred claims on <i>Schedule D</i> aims Secured by Property. Current value of the portion you own?
\4/~.i		ATVs and ather	•			
	mples: Boats, trailers, motor No Yes Make Model:	•	wr recreational vehicles, other string vessels, snowmobiles, recreational vehicles, other string vessels, snowmobiles, recreations with the pone.	motorcycle accessori	Do not deduct secured the amount of any secu	claims or exemptions. Put irred claims on <i>Schedule D</i>
Example Exampl	mples: Boats, trailers, motor No Yes Make	•	er recreational vehicles, other the fishing vessels, snowmobiles, r who has an interest in the	property? Check Ily s and another	Do not deduct secured the amount of any secu	

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Debtor 1 Lisa Swinson Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Futon, Bed, TV, coffee table, recliner \$500.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music No Yes. Describe... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... Books, Pictures \$100.00 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$400.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1000.00 for Part 3. Write that number here

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Swinson

Debtor 1 Lisa Case number (if known) First Name Middle Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ Yes \$50.00 Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$950.00 17.1. Checking account: Bank 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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Debt	tor 1 <u>Lisa</u>	M.	Swinson	Case number (if known)	
	First Name	Middle Name	Last Name		
20.	Negotiable instruments	orate bonds and other negoti include personal checks, cashie ents are those you cannot trans	rs' checks, promissory note	es, and money orders.	
21.	Retirement or pension Examples: Interests in If No Yes. List each account separately.	RA, ERISA, Keogh, 401(k), 403 Type of account: 401(k) or similar plan:	(b), thrift savings accounts, Institution name:	or other pension or profit-sharing plans	
		Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account:			
22.		prepayments d deposits you have made so the with landlords, prepaid rent, pull Electric: Gas: Heating oil: Security deposit on rental unit Prepaid rent: Telephone: Water: Rented furniture:	blic utilities (electric, gas, wa		
23.	Annuities (A contract for No Yes	Other: or a periodic payment of money Issuer name and description:	to you, either for life or for	a number of years)	

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Debt	or 1 Lisa First Name	M. Middle Name	Swinson Last Name	Case number (if known)	
24.		n education IRA, in an account in a quali		er a qualified state tuition program.	
		30(b)(1), 529A(b), and 529(b)(1).	, J. ,		
	No Yes	Institution name and description. Separately	file the records of any interes	ts.11 U.S.C. § 521(c):	
25.	Trusts equita	ble or future interests in property (other	than anything listed in line	1) and rights or nowers	
20.		or your benefit	and anything notou in inio	in and rights of poriors	
	✓ No				
	Yes. Desc	1be			
26		rights trademarks trade secrets and s	ther intellectual property		
26.		rights, trademarks, trade secrets, and or rnet domain names, websites, proceeds from		ements	
	✓ No				
	Yes. Desc	ibe			
0.7					
27.		chises, and other general intangibles ding permits, exclusive licenses, cooperative	association holdings, liquor l	icenses, professional licenses	
	✓ No				
	Yes. Desc	ibe			
Mor	ney or proper	ty owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	ney or proper				portion you own?
	Tax refunds ov	ved to you			portion you own? Do not deduct secured claims or exemptions.
	Tax refunds ov			Federal:	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds ov No Yes. Give s abou you a	ved to you pecific information		Federal: State:	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds on No Yes. Give s abou you a and t	pecific information them, including whether lready filed the returns ne tax years			portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds on No Yes. Give s abou you a and t	pecific information them, including whether lready filed the returns ne tax years	, child support, maintenance,	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds on No Yes. Give s abou you a and t	pecific information them, including whether lready filed the returns the tax years	, child support, maintenance,	State: Local: divorce settlement, property settlemen	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds on No Yes. Give s about you a and t Family support Examples: Past	pecific information them, including whether lready filed the returns the tax years	, child support, maintenance,	State: Local: divorce settlement, property settlemen Alimony:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t
28.	Tax refunds on No Yes. Give s about you a and t Family support Examples: Past	pecific information them, including whether lready filed the returns ne tax years	, child support, maintenance,	State: Local: divorce settlement, property settlemen	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds on No Yes. Give s about you a and t Family support Examples: Past	pecific information them, including whether lready filed the returns ne tax years	, child support, maintenance,	State: Local: divorce settlement, property settlemen Alimony:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t
28.	Tax refunds on No Yes. Give s about you a and t Family support Examples: Past	pecific information them, including whether lready filed the returns ne tax years	, child support, maintenance,	State: Local: divorce settlement, property settlemen Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00
28.	Tax refunds on No Yes. Give s about you a and t Family suppor Examples: Past No Yes. Give s	pecific information them, including whether lready filed the returns ne tax years	, child support, maintenance,	State: Local: divorce settlement, property settlemen Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00
28.	Tax refunds on No Yes. Give s about you a and t Family support Examples: Past No Yes. Give s Other amount Examples: Unp	pecific information them, including whether lready filed the returns ne tax years	sability benefits, sick pay, vaca	State: Local: divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds on No Yes. Give s about you a and t Family support Examples: Past No Yes. Give s Other amount Examples: Unp	pecific information them, including whether lready filed the returns ne tax years t due or lump sum alimony, spousal support pecific information	sability benefits, sick pay, vaca	State: Local: divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds on No Yes. Give s about you a and t Family support Examples: Past No Yes. Give s Other amount Examples: Unp Soc	pecific information them, including whether lready filed the returns ne tax years	sability benefits, sick pay, vaca	State: Local: divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00

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Deb	tor 1 Lisa	M.	Swinson	Case number (if known)	<u></u>
	First Name	Middle Name	Last Name		
31.	Interests in insurance po Examples: Health, disability		vings account (HSA); credit, I	nomeowner's, or renter's insurance	
	Yes. Name the insuran of each policy and list in	ce company	npany name:	Beneficiary:	Surrender or refund value:
32.	Any interest in property to If you are the beneficiary of property because someone	a living trust, expect proce		ey, or are currently entitled to receive	
	Yes. Describe				
33.	Claims against third part Examples: Accidents, emplo		ave filed a lawsuit or made e claims, or rights to sue	a demand for payment	
	No Yes. Describe				
34.	Other contingent and unl	iquidated claims of every	nature, including counter	claims of the debtor and rights	
	No Yes. Describe				
35.	Any financial assets you	did not already list			
	No Yes. Describe				
36.		•	t 4, including any entries f	or pages you have attached	\$1000.00
Dort	Dosoribo Any Rusi	noss Polatod Proport	v Vou Own or Have an I	nterest In. List any real estate in Par	+1
Part					· i.
37.	Do you own or have any l	egal or equitable interes	t in any business-related p		
	No. Go to Part 6. Yes. Go to line 38.				Current value of the portion you own? Do not deduct secured claims or exemptions
38.	Accounts receivable or c	ommissions you already	earned		
	✓ No Yes. Describe				
39.	Office equipment, furnish Examples: Business-related	= -	dems, printers, copiers, fax m	achines, rugs, telephones, desks, chairs, elec	tronic devices
	✓ No Yes. Describe				

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Deb	tor 1 Lisa	М.	Swinson	Case number (if known)	
1.0	First Name	Middle Name	Last Name		
40.	Machinery, fixtures, e	equipment, supplies you	use in business, and tools of yo	our trade	
	✓ No				
	Yes. Describe				
	_				
41.	Inventory				
	✓ No				
	Yes. Describe				
	_				
40					
42.	Interests in partnersh	lips or joint ventures			
	✓ No		Name of entity:	% of ownership:	
	Yes. Give specific		Name of entity.	70 of ownership.	
	information about them				
	uiciii				
					<u> </u>
40	O . 1 P. 1	P.1			_
43. 0	Customer lists, mailing	lists, or other compilat	ions		
	✓ No				
	Yes. Do your lists i	nclude personally identifia	ble information (as defined in 11 l	J.S.C. § 101(41A))?	
	— No				
	<u></u>	vrib o			
	Yes. Desc				
44.	Any business-related	property you did not alr	eady list		
	✓ No				
	Yes. Give specific information				
	inomiation				_
				_	_
					<u> </u>
					
			art 5, including any entries for		
or Pa	art 5. Write that number	er nere			
Part	6. Describe Any F	arm- and Commerci	al Fishing-Related Property	You Own or Have an Interest In.	
· ar		n interest in farmland, list it i			
46.	Do you own or have a	ny legal or equitable in	erest in any farm- or commerc	ial fishing-related property?	
	No. Go to Part 7.				Current value of the
					portion you own?
	Yes. Go to line 47	•			Do not deduct secured claims or exemptions
47	Farm animals				o. o.ompuono
''.	Examples: Livestock, p	oultry, farm-raised fish			
	No No				
	Yes. Describe				
	L 163. Describe				

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Debt	or 1	Lisa First Name	M. Middle Name	Swinson Last Name	Case number (if known)	
48.	Cro	ps-either growing o		Last Harro		
	V	No				
	Ī	Yes. Describe				
49.	Far	m and fishing equipr	ment, implements, machinery,	fixtures, and tools of	trade	
	✓	No				
	Ш	Yes. Describe				
50						
50.	Far		es, chemicals, and feed			
	씜	No Yes. Describe				
	ш					
51.	Any	/ farm- and commerc	ial fishing-related property yo	u did not already list		
	V	No				
	Ħ	Yes. Describe				
52. A	dd th	ne dollar value of all	of your entries from Part 6, inc	luding any entries for	r pages you have attached	
for Pa	rt 6	. Write that number	here			
Part 7			erty You Own or Have an I		u Did Not List Above	
53.			erty of any kind you did not alro , country club membership	eady list?		
	✓	No				
		Yes. Give specific information				
		inomation				
54. A	dd tl	ne dollar value of all	of your entries from Part 7. Wr	ite that number here		>
Part 8	3.	List the Totals of I	Each Part of this Form			
55. F	art	1: Total real estate,	line 2		P	
56. p	art	2 total vehicles, line	5	\$21700.00		
57. P	art 3	3: Total personal and	I household items, line 15	\$1000.00		
58. P	art 4	l: Total financial ass	ets, line 36	\$1000.00		
59. F	art	5: Total business-rel	ated property, line 45	41000.00		
60. F	art	6: Total farm- and fis	shing-related property, line 52			
61. F	art	7: Total other prope	rty not listed, line 54	<u></u>		
62. T	otal	personal property.	Add lines 56 through 61			, ¢22700.00
		- ·		\$23700.00	Copy personal property total	+ \$23700.00
						\$23700.00
63. T	otal	of all property on Sc	hedule A/B. Add line 55 + line 6	2		

		Case 17-80489		03/06/17 ument	Entered 03/06/17 Page 28 of 66	14:03:34	Desc Main
Filli	in this infor	mation to identify your case:					
Deb	otor 1	Lisa	M.	Swinson			
Б.		First Name	Middle Name	Last Nam	ne		
	otor 2 ouse, if filing)	First Name	Middle Name	Last Nam	ne e		
Unit	ted States B	ankruptcy Court for the: Nor	thern	District of Illino	ois		
Coo	a number			(Sta	te)		
	se number nown)						
\sim	: : : -: -!	Town 1000					Check if this is an
U I	Ticiai	Form 106C					amended filing
Sc	hedul	e C: The Propert	y You Claim	as Exem	pt		12/15
For stat the tax- und	each iten e a specif amount o exempt r ler a law t r exempti	ges, write your name and on of property you claim a fic dollar amount as exer of any applicable statutor etirement funds—may be	case number (if knowns exempt, you mus mpt. Alternatively, y limit. Some exeme unlimited in dollar to a particular dollar e applicable statute	vn). t specify the ou may clair ptions—sucl r amount. Ho ar amount ar	amount of the exemption n the full fair market valu n as those for health aids wever, if you claim an ex	n you claim. O le of the prope , rights to rec emption of 10	necessary. On the top of any one way of doing so is to erty being exempted up to eive certain benefits, and 00% of fair market value ned to exceed that amount,
1.	Which set	t of exemptions are you clair	ming? Check one only,	even if your spo	ouse is filing with you.		
	✓ You a	You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)					
	You a	You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)					
2.	For any p	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.					
		cription of the property and chedule A/B that lists this	Current value of the portion you	Amount of	the exemption you claim	Specifi	c laws that allow exemption

Check only one box for each exemption.

\$0

\$100.00

100% of fair market value, up to any

100% of fair market value, up to any

applicable statutory limit

applicable statutory limit

own

Copy the value from Schedule A/B

\$21,700.00

\$100.00

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

✓

 $\overline{\mathbf{V}}$

property

Brief

Brief

description:

Line from

Schedule A/B:

description:

Line from

Schedule A/B:

No Yes

GMC Sierra, 2014

Books, Pictures

03

80

Are you claiming a homestead exemption of more than \$160,375?

735 ILCS 5/12-1001(c); 735 ILCS

5/12-1001(b)

735 ILCS 5/12-1001(b)

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M. Swinson Debtor 1 Lisa Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$50.00 description: **✓** \$50.00 Cash 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 16 Brief 735 ILCS 5/12-1001(b) \$950.00 description: **✓** \$950.00 Checking account, Bank 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: Brief 735 ILCS 5/12-1001(a) \$400.00 description: **✓** \$400.00 **Used Clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 11 735 ILCS 5/12-1001(b) Brief \$500.00 description: \$500.00 Futon, Bed, TV, coffee 100% of fair market value, up to any table, recliner

applicable statutory limit

Line from Schedule A/B:

06

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			Do	ocument Page 30 of	66		
Fill in	this inforr	mation to identify your cas	se:				
Debto	or 1	Lisa First Name	M. Middle Name	Swinson Last Name			
Debto (Spous	or 2 e, if filing)	First Name	Middle Name	Last Name			
		ankruptcy Court for the:	Northern	District of Illinois (State)			
(If knov	number vn)						
Off	icial	Form 106D			_		Check if this is an mended filing
			ore Who Ha	ve Claims Secure	ad by Prop		Ū
							12/15
more	space is r	-		le are filing together, both are equ mber the entries, and attach it to t	• •		
		reditors have claims se	ecured by your prope	rtv?			
- 1				with your other schedules. You have	e nothing else to repo	ort on this form.	
i	Yes. I	Fill in all of the information	n below.	·			
Part		All Secured Claims					
2.	List all s	secured claims. If a credit by for each claim. If more th	nan one creditor has a pa	cured claim, list the creditor rticular claim, list the other creditors I order according to the creditor's	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	PNC Bar Creditor's		Describe the propert	y that secures the claim:	\$29,809.00	\$21,700.00	\$8,109.00
	PO Box	535230 Street	Auto Loan - 2014 GM	C Sierra e, the claim is: Check all that apply.			
		ankruptcy Dept.	Contingent	e, the claim is. Oneck all that apply.			
	PITTSBU	JRGH PA 15253	Unliquidated				
	City	State ZIP Code	Disputed				
		es the debt? Check one. tor 1 only	Nature of lien. Check	all that apply.			
	Deb	tor 2 only		made (such as mortgage or secured			
	Debtor 1 and Debtor 2 only	Statutory lien (sucl	n as tax lien, mechanic's lien)				
	At least one of the debtors and another		Judgment lien from	n a lawsuit			
		ck if this claim relates community debt	Other (including a	right to offset)			
	Date de incurred	bt was	Last 4 digits of accou	unt number			

Add the dollar value of your entries in Column A on this page. Write that number

\$29,809.00

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Fill in this info	rmation to identify your c	ase:			
Debtor 1	Lisa	M.	Swinson		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	E'm I Nimo	NAC-L-III - NI	LastMassa		
(Spouse, It lilling)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	Northern	District of Illinois		
Coop number			(State)		
Case number (If known)					
Official F	Form 106E/F				Check if this is an amended filing
Official i	OHH TOOL/I				
Sched	ule E/F: Cre	editors Who	Have Unsec	ured Claims	12/1:
other party to Form 106A/B; claims that a the entries in known).	any executory contracts and on Schedule G: Exe re listed in Schedule D: C	s or unexpired leases that cutory Contracts and Ur Creditors Who Hold Claim tach the Continuation P	at could result in a claim. Al nexpired Leases (Official Fo ns Secured by Property. If m	lso list executory contracts rm 106G). Do not include an lore space is needed, copy t	n NONPRIORITY claims. List the on Schedule A/B: Property (Official by creditors with partially secured he Part you need, fill it out, number rite your name and case number (if
			. 0		
	creditors have priority un Go to Part 2.	isecured claims against	you?		
✓ No.					
listed, id As much	entify what type of claim it as possible, list the claims	is. If a claim has both priors in alphabetical order acco	rity and nonpriority amounts, I	list that claim here and show b If you have more than two pric	arately for each claim. For each claim ooth priority and nonpriority amounts. ority unsecured claims, fill out the

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total

claim

Priority

amount

Nonpriority

amount

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Debtor 1 Lisa M. Swinson Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 Barclays Bank Delaware \$2,439.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 8803 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated WILMINGTON 19899 Delaware City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **✓** Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ Credit Card Purchases Is the claim subject to offset? Yes 4.2 Barclays Bank Delaware \$2,121.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a PO Box 8803 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 19899 WILMINGTON Delaware City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ Credit Card Purchases Is the claim subject to offset? **✓** No Yes 4.3 Chase Bank USA \$518.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a PO Box 15298 As of the date you file, the claim is: Check all that apply. Attn: Bankruptcy Dept. Contingent Unliquidated **WILMINGTON** 19850 Delaware City Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only **✓** Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify _ Credit Card Purchases Is the claim subject to offset? **✓** No Offician Yes Schedule E/F: Creditors Who Have Unsecured Claims page 2

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 Debtor 1 First Name
 Lisa
 M.
 Swinson
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part :	Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page					
	After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.					
4.4	After listing any entries on this page, number them beginning of Citicards CBNA Nonpriority Creditor's Name PO Box 6241 Number Street Attn: Bankruptcy Dept. SIOUX FALLS South Dakota 57117 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes	with 4.5, followed by 4.6, and so forth. Last 4 digits of account number	**Total claim** **2,143.00** **Page 1.5			
4.5	Comenity/Buckle Nonpriority Creditor's Name P.O. Box 182789 Number Street COLUMBUS Ohio 43218 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes	Last 4 digits of account number When was the debt incurred? n/a As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Purchases	\$2,231.00			
4.6	First Northern Credit Union Nonpriority Creditor's Name 230 W Monroe St Suite2850 Number Street Attn: Bankruptcy Dept. CHICA Illinois 60606 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number When was the debt incurred? n/a As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Purchases	\$5,061.00			

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 Debtor 1 First Name
 Lisa
 M.
 Swinson
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 2	Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page						
	After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.						
4.7	After listing any entries on this page, number them beginning with GECRBPAYPALSMARTCONN Nonpriority Creditor's Name PO Box 965005 Number Street Attn: Bankruptcy Dept. ORLANDO Florida 32896 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? Yes	ith 4.5, followed by 4.6, and so forth. Last 4 digits of account number	*2,852.00				
4.8	SYNCB/Dicks Sporting Goods Nonpriority Creditor's Name P.O. Box 965005 Number Street ORLANDO Florida 32896 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes	When was the debt incurred?	\$1,002.00				
4.0	<u> </u>		¢1 290 00				
4.9	Syncb/Sams Club Nonpriority Creditor's Name PO Box 965005 Number Street	- Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent	\$1,280.00				
	ORLANDO Florida 32896 City State Zip Code Who incurred the debt? Check one.	Unliquidated Disputed Type of NONPRIORITY unsecured claim:					
	Debtor 1 only	Student loans					
	Debtor 2 only	Obligations arising out of a separation agreement or					
	Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims					
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts					
	☐ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No ☐ Yes	Other. Specify Credit Card Purchases					

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Debtor 1 Lisa M. Swinson __ Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 SYNCB/Wal-Mart \$699.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 965024 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Attn: Bankruptcy Dept. Contingent Unliquidated 32896 ORLANDO Florida Disputed City Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Credit Card Purchases Is the claim subject to offset? **✓** No Yes

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Debtor 1 Lisa M. Swinson Case number (if known)

First Name Middle Name Last Name Part 4: Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 Total claims 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$0.00 **Total claims** 6f. Student loans from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims \$0.00 6h. Debts to pension or profit-sharing plans, and other similar 6h. \$20,346.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$20,346.00 6j. Total. Add lines 6f through 6i.

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Fill in this infor	mation to identify your ca	ase:	
Debtor 1	Lisa	M.	Swinson
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		Northern	District of Illinois
			(State)
Case number			

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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			DC	cument ray	Je 30 01 00
Fill	in this	information to identify your ca	se:		
Del	btor 1	Lisa	M.	Swinson	
		First Name	Middle Name	Last Name	
_	btor 2				
(Spo	ouse, if fil	First Name	Middle Name	Last Name	
Un	ited Sta	tes Bankruptcy Court for the:	Northern	District of Illinois	
				(State)	
	se num nown)	ber			
`					Check if this is an
					amended filing
\bigcirc	ffici	al Form 106H			
		<u> </u>			
Sc	chec	lule H: Your Code	ebtors		12/15
filin the	g toge entries	ther, both are equally respons	sible for supplying corre	ect information. If more	as complete and accurate as possible. If two married people are e space is needed, copy the Additional Page, fill it out, and number top of any Additional Pages, write your name and case number (if
1.	Do yo	u have any codebtors? (If you	ı are filing a joint case, do	not list either spouse as	s a codebtor.)
	V	No			
	П	Yes			
2.		n the last 8 years, have you li , Louisiana, Nevada, New Mexic			(Community property states and territories include Arizona, California, in.)
	V	No. Go to line 3.			
	Ħ	Yes. Did your spouse, former	spouse, or legal equiva	alent live with you at the	e time?
	<u> </u>	✓ No			
	İ	Yes. In which community	state or territory did you	u live?	Fill in the name and current address of that person.

Zip Code

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Name of your spouse, former spouse, or legal equivalent

State

Number Street

City

Column 1: Your codebtor

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			_		
Fill in this information to identify	your case:				
Debtor 1 Lisa	M.	Swinson			
First Name	Middle Name	Last Nam	ne	Ch	eck if this is:
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Nam	10	- -	An amended filing
					□ A supplement showing post-petition chapter
United States Bankruptcy Court for the:	Northern	District of Illinoi (State		- "	expenses as of the following date:
Case number		(State	C)		
(If known)					MM / DD / YYYY
Official Form 106I					
Schedule I: Your In	come				12
	l, attach a separate she y question.				o not include information about your tional pages, write your name and case
Fill in your employment		Debtor 1			Debtor 2
information.					
If you have more than one job, attach a separate page with information about additional	Employment status	Employed Not Empl			☐ Employed✓ Not Employed
employers.	Occupation				
Include part time, seasonal, or self-employed work.	Employer's name	Advanced Dis	posal Service	s	
	Employer's address	13125 North	2nd Street		
Occupation may include student or homemaker, if it applies.		Number Street			Number Street
		Roscoe	Illinois	61073	_
		City	State	Zip Code	City State Zip Code
	How long employed there?	6 months			
spouse unless you are separated.	the date you file this form e more than one employer, et to this form. ary, and commissions (befo	combine the info	ormation for	-	write \$0 in the space. Include your non-filing for that person on the lines below. If you need For Debtor 2 or non-filing spouse \$0.00
be. 3. Estimate and list monthly over	•	wage would 3.		+ \$0.00	+ \$0.00

\$3,465.65

\$0.00

4. Calculate gross income. Add line 2 + line 3.

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Debtor 1Lisa First Name		winson ast Name	Case numbe	r <i>(if</i>	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	image name	iot riamo	For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here		→ 4.	\$3,465.65	\$0.00	
5. List all payroll deductions:					
5a. Tax, Medicare, and So	cial Security deductions	5a.	\$747.67	\$0.00	
5b. Mandatory contributio	ns for retirement plans	5b.	\$0.00	\$0.00	
5c. Voluntary contribution	s for retirement plans	5c.	\$0.00	\$0.00	
5d. Required repayments	of retirement fund loans	5d.	\$0.00	\$0.00	
5e. Insurance		5e.	\$0.00	\$0.00	
5f. Domestic support oblig	gations	5f.	\$0.00	\$0.00	
5g. Union dues		5g.	\$0.00	\$0.00	
5h. Other deductions. Spe	cify:	5h. +	\$0.00 +	\$0.00	
6. Add the payroll deductions +5h.	s. Add lines 5a + 5b + 5c + 5d + 5e +5f	+ 5g 6.	\$747.67	\$0.00	
7. Calculate total monthly tal	ke-home pay. Subtract line 6 from line 4	4. 7.	\$2,717.98	\$0.00	
8. List all other income regul	arly received:				
business, profession, o	Il property and from operating a or farm ach property and business showing				
	and necessary business expenses, and	8a.	\$0.00	\$0.00	
8b. Interest and dividends		8b.	\$0.00	\$0.00	
	nts that you, a non-filing spouse, or a				
Include alimony, spousa divorce settlement, and p	al support, child support, maintenance, property settlement.	8c.	\$0.00	\$0.00	
8d. Unemployment compe	nsation	8d.	\$0.00	\$0.00	
8e. Social Security		8e.	\$0.00	\$0.00	
Include cash assistance a cash assistance that you	stance that you regularly receive and the value (if known) of any non- receive, such as food stamps (benefits Nutrition Assistance Program) or	8f.	\$0.00	\$0.00	
8g. Pension or retirement	income	8g.	\$0.00	\$0.00	
8h. Other monthly income	Specify:	8h. +	\$0.00 +	\$0.00	
9. Add all other income Add li	ines 8a + 8b + 8c + 8d + 8e + 8f +8g +		\$0.00	\$0.00	
10. Calculate monthly income Add the entries in line 10 for	e. Add line 7 + line 9. Debtor 1 and Debtor 2 or non-filing spo	10. ouse	\$2,717.98 +	\$0.00	= \$2,717.98
Include contributions from a friends or relatives.	ntributions to the expenses that you in unmarried partner, members of your has already included in lines 2-10 or amour	iousehold, your	dependents, your roomn		
Specify:					11. + \$0.00
	st column of line 10 to the amount in ummary of Schedules and Statistical Sum				12. \$2,717.98 Combined monthly income
13. Do you expect an increas No. Yes. Explain:	e or decrease within the year after yo	ou file this forn	n?		monthly medille

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		Docu	ment Page 41 of 66	5	
Fill in this infor	mation to identify	your case:			
Debtor 1	Lisa First Name	M. Middle Name	Swinson Last Name	Ob sale if their in-	
Debtor 2				Check if this is:	
(Spouse, if filing)	First Name	Middle Name	Last Name	An amended fili	ng
	Bankruptcy Court fo	or the: Northern [District of Illinois (State)		howing post-petition chapter 13 the following date:
Case number (If known)				MM / DD / YYY	<u>Y</u>
	Form 106				12/1
information. If (if known). Ans					
1. Is this a joi	nt case?				
✓ No. Go	to line 2				
_	oes Debtor 2 live	in a separate household?			
	No				
L		and the Official Forms 100 LO. Forms	and for Commental Harrack and of Dake	0	
0.00		nust file Official Forms 106J-2, Exper	ises for Separate Houserfold of Debt	OI 2.	
	e dependents?	No			
Do not list D Debtor 2.	ebtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
			Child		No. ✓ Yes.
	penses include f people other	✓ No			
yourself and dependents	-	Yes			
Part 2: Esti	mate Your Onge	oing Monthly Expenses			
_	of a date after the	our bankruptcy filing date unless y bankruptcy is filed. If this is a sup	•	•	-
		non-cash government assistance ided it on Schedule I: Your Income			Your expenses
	or home ownersl or the ground or lot	hip expenses for your residence. In . 4.	clude first mortgage payments and		\$625.00
If not incl	uded in line 4:				

4a

4b.

4c.

4d.

\$0.00

\$15.00

\$0.00

\$0.00

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Lisa M. Swinson Case number (if known)
First Name Middle Name Last Name

First Name whome Name Last Name		
		Your expenses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	\$108.00
6b. Water, sewer, garbage collection	6b.	\$0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$360.00
6d. Other. Specify:	6d	\$0.00
7. Food and housekeeping supplies	7.	\$100.00
8. Childcare and children's education costs	8.	\$600.00
9. Clothing, laundry, and dry cleaning	9.	\$0.00
10. Personal care products and services	10.	\$50.00
11. Medical and dental expenses	11.	\$0.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments	12.	\$300.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00
14. Charitable contributions and religious donations	14.	\$0.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$140.00
15d. Other insurance. Specify:	15d	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16	\$0.00
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a	\$509.00
17b. Car payments for Vehicle 2	17b	\$0.00
17c. Other. Specify:		\$0.00
17d. Other. Specify:		\$0.00
18. Your payments of alimony, maintenance, and support that you did not report as d	educted from	\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19. Other payments you make to support others who do not live with you. Specify:	10	Ф0.00
20.Other real property expenses not included in lines 4 or 5 of this form or on Schedu	19.	\$0.00
20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes.	20b	\$0.00
20c. Property, homeowner's, or renter's insurance	20c	\$0.00
20d. Maintenance, repair, and upkeep expenses.	20d	\$0.00
20e. Homeowner's association or condominium dues	20e	\$0.00
	206	φυ.υυ

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Debtor 1 Li		M.	Swinson	Case number (if known)		
	irst Name	Middle Name	Last Name			
21. Other. S	Specify:				21	\$0.00
	ate your monthly expense	S.				\$2,807.00
	d lines 4 through 21.	(D I : 0) '(\$0.00
	ppy line 22 (monthly expense	,,				\$2,807.00
	d line 22a and 22b. The res		enses.		22.	
	ite your monthly net incon					
23a. Co	py line 12 (your combined r	monthly income) from	Schedule I.		23a	\$2,717.98
23b. Co	ppy your monthly expenses	from line 22 above.			23b	\$2,807.00
	btract your monthly expense		ncome.			(\$89.03)
Th	ne result is your monthly net	income.			23c	
For exa		sh paying for your car	oan within the year or do yo	ou expect your		

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Fill in this infor	mation to identify your ca	ase:	
Debtor 1	Lisa	M.	Swinson
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		Northern	District of Illinois (State)
Case number			(State)

Official Form 106Dec

П	Check if this is an
	amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below					
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?					
	✓ No					
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).				
	Under penalty of perjury, I declare that I have read the summary a that they are true and correct.	and schedules filed with this declaration and				
x	/s/ Lisa Swinson	×				
~	Signature of Debtor 1	Signature of Debtor 2				
	Date 3/6/2017	Date				
	MM/DD/YYYY	MM/DD/YYYY				

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Debtor 1	Lisa First Name	M. Middle Name	Swinson Last Nam				
Debtor 2 (Spouse, if filir		Middle Name					
	First Namees Bankruptcy Court for the:		Last Nam District of Illino				
		Northern	(State				
Case numb (If known)	Der						
Officia	al Form 107						Check if this amended filin
	nent of Financia	al Affairs for I	ndividuals	Filing for	Bankru	ıptcy	1:
	plete and accurate as po n. If more space is neede						
	known). Answer every q			. On the top o	i uniy udunio	na pagoo, wiic	your name and odde
Part 1: 0	ive Details About Your	Marital Status and	Where You Lived	Before			
1. Wha	t is your current marital sta	atus?					
	t is your ourient maritar st	utus.					
	Marriad						
✓	Married Not married						
✓	Not married						
2. Duri	Not married	ou lived anywhere othe	er than where you liv	ve now?			
2. Duri	Not married ng the last 3 years, have yo No	·	·		OOW.		
2. Duri	Not married	·	·		iow.		
2. Duri	Not married ng the last 3 years, have yo No	ou lived in the last 3 yea	ars. Do not include v		iow.		Dates Debtor 2 lived there
2. Duri	Not married ng the last 3 years, have you No Yes. List all of the places yo	ou lived in the last 3 year	ars. Do not include v	Where you live r	now. Debtor 1		
2. Duri	Not married ng the last 3 years, have you No Yes. List all of the places you Debtor 1:	ou lived in the last 3 year	ars. Do not include v tes Debtor 1 lived tre	Debtor 2:	Debtor 1		there
2. Duri	Not married ng the last 3 years, have you No Yes. List all of the places yo	ou lived in the last 3 year	ars. Do not include v tes Debtor 1 lived tre	Where you live r	Debtor 1		there Same as Debtor 1
2. Duri	Not married ng the last 3 years, have you No Yes. List all of the places you Debtor 1:	Da the	ars. Do not include v tes Debtor 1 lived tre	Debtor 2:	Debtor 1		there Same as Debtor 1 From
2. Duri	Not married ng the last 3 years, have you No Yes. List all of the places you Debtor 1:	Da the	ars. Do not include v tes Debtor 1 lived tre	Debtor 2: Same as Number Stre	Debtor 1 et State	Zip Code	there Same as Debtor 1 From To
2. Durin	Not married ng the last 3 years, have you No Yes. List all of the places you Debtor 1:	Day the	ars. Do not include v tes Debtor 1 lived tre	Debtor 2: Same as Number Stre	Debtor 1 et	Zip Code	there Same as Debtor 1 From
2. Duri	Not married ng the last 3 years, have you No Yes. List all of the places you Debtor 1:	Day the	ars. Do not include v	Debtor 2: Same as Number Stre	Debtor 1 et State Debtor 1	Zip Code	there Same as Debtor 1 From To
2. Duri	Not married Ing the last 3 years, have you No Yes. List all of the places you Debtor 1: Number Street City State	Day the last 3 years th	ars. Do not include v	Debtor 2: Same as Number Stre	Debtor 1 et State Debtor 1	Zip Code	there Same as Debtor 1 From To Same as Debtor 1
2. Duri	Not married Ing the last 3 years, have you No Yes. List all of the places you Debtor 1: Number Street City State	Day the last 3 year the Zip Code	ars. Do not include v	Debtor 2: Same as Number Stre	Debtor 1 et State Debtor 1	Zip Code	there Same as Debtor 1 From To Same as Debtor 1 From From

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Swinson

M.

Debtor 1 Lisa Case number (if known) First Name Middle Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$6398.10 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$15497.00 For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, **✓** \$29495.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

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Swinson Debtor 1 Lisa M. __ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage PNC Bank 1/2017 - 3/2017 \$1527.00 \$29000.00 Creditor's Name Car **V** PO Box 535230 Credit card Number Street Attn: Bankruptcy Dept. Loan repayment PITTSBURGH Pennsylvania 15253 Suppliers or City State vendors Zip Code Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car **Number Street** Credit card Loan repayment

City

State

Zip Code

Suppliers or vendors
Other

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sided include your relatives; any general partners; relatives of any general partners; partnerships of which you are an old proportions of which you are an old proportions of which you are an old proportions of which you are an old proportions, or which you are a proportions; and any managing gent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, uch as child support and alimony. No Yes. List all payments to an insider. Dates of payment Still owe	or 1	Lisa		M.		vinson	Case number	(if known)
Yes. List all payments to an insider. Dates of payment paid Still owe Reason for this payment paid Still owe Reason for this payment payment paid Still owe Reason for this payment payment paid Still owe Reason for this payment payment payment paid Still owe Reason for this payment payment paid Still owe Reason for this payment paym		First Name		Middle Name	Las	st Name		
Ves. List all payments to an insider. Dates of payment Dates of Dates of Dates of Dates of payment Dates of Date	nsi com age	ders include your porations of which nt, including one	relatives; an you are a for a busin	any general partner an officer, director, ness you operate a	s; relatives of any person in control,	general partners; par or owner of 20% o	tnerships of which y r more of their voting	ou are a general partner; g securities; and any managing
Dates of payment Dates of payment Amount you still owe Reason for this payment	✓							
Number Street City State Zip Code	Ц	Yes. List all pay	ments to a	an insider.				Reason for this payment
City State Zip Code Insider's Name Number Street		Insider's Name						
Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. ✓ No Yes. List all payments that benefited an insider. Dates of payment paid Total amount you still owe Insider's Name Number Street City State Zip Code Insider's Name Number Street		Number Street						
Number Street City State Zip Code		City	State	Zip Code				
City State Zip Code		Insider's Name						
Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment Dates of payment Insider's Name Number Street City State Zip Code Insider's Name Number Street		Number Street						
Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No		City	State	Zip Code				
Insider's Name Number Street City State Zip Code Insider's Name Number Street		ude payments on No	_	-	sider. Dates of		-	1.
City State Zip Code Insider's Name Number Street		Insider's Name						
Insider's Name Number Street		Number Street						
Number Street		City	State	Zip Code				
		Insider's Name						
City State Zin Code		Number Street						
		City	State	Zip Code				

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Swinson Debtor 1 Lisa Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No **V** Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State

Property was attached, seized, or levied.

Zip Code

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Debt	tor 1 Lisa First Name	M. Middle Name	Swinson Last Name	Case number (if known)	
11.		ore you filed for bankruptcy, did to make a payment because yo		pank or financial institution, set off any am	ounts from your
	✓ No ☐ Yes. Fill in the	details.			
			Describe the action th	e creditor took Date action was taken	Amount
	Creditor's Name	е			-
	Number Street		Last 4 digits of account	number: XXXX-	
	City	State Zip Code			
12.		e you filed for bankruptcy, was a , a custodian, or another official		possession of an assignee for the benefit (of creditors, a court-
	✓ No ✓ Yes				
Part	List Certain C	Gifts and Contributions			
13.	- N	fore you filed for bankruptcy, did	you give any gifts with a t	otal value of more than \$600 per person?	
	✓ No ✓ Yes. Fill in the	details for each gift.			
	Gifts with a to per person	tal value of more than \$600	Describe the gifts	Dates you gave the gifts	Value
	Person to Who	m You Gave the Gift			
	Number Street	:			
	City Person's relatio	State Zip Code nship to you			
	Person to Who	m You Gave the Gift			_
	Number Street				
	City Person's relatio	State Zip Code nship to you			

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	Lisa	M.	Swinson	Case number (if know)	7)	
	First Name	Middle Name	Last Name			
. Wit	thin 2 years before you file	d for bankruptcy, did	you give any gifts or contributions	with a total value o	f more than \$600	to any charity?
	No					
✓						
	Yes. Fill in the details for ϵ	each gift or contributi	on.			
	Gifts or contributions to	charities	Describe what you contribute	d	Date you	Value
	that total more than \$60		Dodding what you continues	-	contributed	Tuluo
	1014					
						-
	Charity's Name					
			_			
	Number Street		-			
	Number Street					
	City State	Zip Code	-			
	City State	Zip Code				
	List Certain Losses					
. О.	List Gertain Losses					
	Yes. Fill in the details. Describe the property yo how the loss occurred	u lost and	Describe any insurance cover Include the amount that insuran	ce has paid. List	Date of your loss	Value of property lost
			pending insurance claims on line	33 of <i>Schedule</i>		
			A/B: Property.			
rt 7:	List Certain Payments	or Transfers				
abo	out seeking bankruptcy or	preparing a bankrup				anyone you consulte
abo	out seeking bankruptcy or lude any attorneys, bankrupte No	preparing a bankrup				anyone you consulte
abo	out seeking bankruptcy or lude any attorneys, bankrupto	preparing a bankrup	tcy petition?			anyone you consulte
abo	out seeking bankruptcy or lude any attorneys, bankrupte No	preparing a bankrup	tcy petition?	es required in your ba	Date payment or transfer	Amount of payment
abo	out seeking bankruptcy or lude any attorneys, bankrupto No Yes. Fill in the details.	preparing a bankrup	tcy petition? or credit counseling agencies for service Description and value of any p transferred	es required in your ba	Date payment or transfer was made	Amount of payment
abo	but seeking bankruptcy or lude any attorneys, bankrupton No Yes. Fill in the details. Springer Law Firm	preparing a bankrup	tcy petition? or credit counseling agencies for service Description and value of any p	es required in your ba	Date payment or transfer	Amount of
abo	out seeking bankruptcy or lude any attorneys, bankrupted No Yes. Fill in the details. Springer Law Firm Person Who Was Paid	preparing a bankrup	tcy petition? or credit counseling agencies for service Description and value of any p transferred	es required in your ba	Date payment or transfer was made	Amount of payment
abo	out seeking bankruptcy or lude any attorneys, bankrupted No Yes. Fill in the details. Springer Law Firm Person Who Was Paid 2222 E State St.	preparing a bankrup	tcy petition? or credit counseling agencies for service Description and value of any p transferred	es required in your ba	Date payment or transfer was made	Amount of payment
abo	out seeking bankruptcy or lude any attorneys, bankrupted No Yes. Fill in the details. Springer Law Firm Person Who Was Paid	preparing a bankrup	tcy petition? or credit counseling agencies for service Description and value of any p transferred	es required in your ba	Date payment or transfer was made	Amount of payment
abo	out seeking bankruptcy or lude any attorneys, bankruptch No Yes. Fill in the details. Springer Law Firm Person Who Was Paid 2222 E State St. Number Street	preparing a bankrup	tcy petition? or credit counseling agencies for service Description and value of any p transferred	es required in your ba	Date payment or transfer was made	Amount of payment
abo	Springer Law Firm Person Who Was Paid 2222 E State St. Number Street # 107	preparing a bankrup cy petition preparers, o	tcy petition? or credit counseling agencies for service Description and value of any p transferred	es required in your ba	Date payment or transfer was made	Amount of payment
abo	Springer Law Firm Person Who Was Paid 2222 E State St. Number Street # 107 Rockford Illinois	preparing a bankrup cy petition preparers, o	tcy petition? or credit counseling agencies for service Description and value of any p transferred	es required in your ba	Date payment or transfer was made	Amount of payment
abo	Springer Law Firm Person Who Was Paid 2222 E State St. Number Street # 107	preparing a bankrup cy petition preparers, o	tcy petition? or credit counseling agencies for service Description and value of any p transferred	es required in your ba	Date payment or transfer was made	Amount of payment
abo	Springer Law Firm Person Who Was Paid 2222 E State St. Number Street # 107 Rockford Illinois City State	preparing a bankrup cy petition preparers, o	tcy petition? or credit counseling agencies for service Description and value of any p transferred	es required in your ba	Date payment or transfer was made	Amount of payment
abo	Springer Law Firm Person Who Was Paid 2222 E State St. Number Street # 107 Rockford Illinois	preparing a bankrup cy petition preparers, o	tcy petition? or credit counseling agencies for service Description and value of any p transferred	es required in your ba	Date payment or transfer was made	Amount of payment
abo	Springer Law Firm Person Who Was Paid 2222 E State St. Number Street # 107 Rockford Illinois City State Email or website address	preparing a bankrup cy petition preparers, o 61104 Zip Code	tcy petition? or credit counseling agencies for service Description and value of any p transferred	es required in your ba	Date payment or transfer was made	Amount of payment
abo	Springer Law Firm Person Who Was Paid 2222 E State St. Number Street # 107 Rockford Illinois City State	preparing a bankrup cy petition preparers, o 61104 Zip Code	tcy petition? or credit counseling agencies for service Description and value of any p transferred	es required in your ba	Date payment or transfer was made	Amount of payment
abo	Springer Law Firm Person Who Was Paid 2222 E State St. Number Street # 107 Rockford Illinois City State Email or website address	preparing a bankrup cy petition preparers, o 61104 Zip Code	tcy petition? or credit counseling agencies for service Description and value of any p transferred	es required in your ba	Date payment or transfer was made	Amount of payment
abo	Springer Law Firm Person Who Was Paid 2222 E State St. Number Street # 107 Rockford Illinois City State Email or website address	preparing a bankrup cy petition preparers, o 61104 Zip Code	tcy petition? or credit counseling agencies for service Description and value of any p transferred	es required in your ba	Date payment or transfer was made	Amount of payment
abo	Springer Law Firm Person Who Was Paid 2222 E State St. Number Street # 107 Rockford Illinois City State Email or website address Person Who Made the Payr	preparing a bankrup cy petition preparers, o 61104 Zip Code	tcy petition? or credit counseling agencies for service Description and value of any p transferred	es required in your ba	Date payment or transfer was made	Amount of payment
abo	Springer Law Firm Person Who Was Paid 2222 E State St. Number Street # 107 Rockford Illinois City State Email or website address Person Who Made the Payr	preparing a bankrup cy petition preparers, o 61104 Zip Code	tcy petition? or credit counseling agencies for service Description and value of any p transferred	es required in your ba	Date payment or transfer was made	Amount of payment
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abo	Springer Law Firm Person Who Was Paid 2222 E State St. Number Street # 107 Rockford Illinois City State Email or website address Person Who Made the Payl	preparing a bankrup cy petition preparers, o 61104 Zip Code	tcy petition? or credit counseling agencies for service Description and value of any p transferred	es required in your ba	Date payment or transfer was made	Amount of payment
abo	Springer Law Firm Person Who Was Paid 2222 E State St. Number Street # 107 Rockford Illinois City State Email or website address Person Who Made the Payl	preparing a bankrup cy petition preparers, o 61104 Zip Code	tcy petition? or credit counseling agencies for service Description and value of any p transferred	es required in your ba	Date payment or transfer was made	Amount of payment
abo	Springer Law Firm Person Who Was Paid 2222 E State St. Number Street # 107 Rockford Illinois City State Email or website address Person Who Made the Payl	preparing a bankrup cy petition preparers, o 61104 Zip Code	tcy petition? or credit counseling agencies for service Description and value of any p transferred	es required in your ba	Date payment or transfer was made	Amount of payment
abo	Springer Law Firm Person Who Was Paid 2222 E State St. Number Street # 107 Rockford Illinois City State Email or website address Person Who Made the Payl	expering a bankrup cy petition preparers, o 61104 Zip Code	tcy petition? or credit counseling agencies for service Description and value of any p transferred	es required in your ba	Date payment or transfer was made	Amount of payment
abo	Springer Law Firm Person Who Was Paid 2222 E State St. Number Street # 107 Rockford Illinois City State Email or website address Person Who Made the Payl	expering a bankrup cy petition preparers, o 61104 Zip Code	tcy petition? or credit counseling agencies for service Description and value of any p transferred	es required in your ba	Date payment or transfer was made	Amount of payment
abo	Springer Law Firm Person Who Was Paid 2222 E State St. Number Street # 107 Rockford Illinois City State Email or website address Person Who Was Paid Number Street # 107 Rockford Illinois City State Email or website address Person Who Made the Payr Person Who Was Paid Number Street	61104 Zip Code Zip Code	tcy petition? or credit counseling agencies for service Description and value of any p transferred	es required in your ba	Date payment or transfer was made	Amount of payment

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Debt	tor 1		M.		se number (if known)		
		First Name	Middle Name	Last Name			
17.	help	hin 1 year before you filed by you deal with your credit not include any payment or the No	tors or to make paym		ılf pay or transfer any ı	property to anyon	e who promised to
	Ħ	Yes. Fill in the details.					
				Description and value of any prop transferred	pay	yment or nsfer was	ount of payment
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
	Incl	ordinary course of your bude both outright transfers a transfers that you have alread No Yes. Fill in the details.	and transfers made as s	security (such as the granting of a security nent.			
				Description and value of any property transferred	Describe any prop payments receive in exchange		Date transfer was made
		Ken Nelson Person Who Received Tran	sfer	2010 Chevy Camaro SS and 2008 Pontiac G6	Vehicles had loan were used as trad vehicle.		10/2016
		Number Street					
		City State Person's relationship to you None	Zip Code u				
		Person Who Received Tran	sfer				
		Number Street					
		City State Person's relationship to you	Zip Code u				
19.	ben	hin 10 years before you file reficiary? ese are often called asset-pro No Yes. Fill in the details.		d you transfer any property to a self-se	ttled trust or similar d	levice of which yo	u are a
				Description and value of the prop	perty transferred		Date transfer was made
		Name of trust					

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Debtor 1 Lisa M. Swinson Case number (if known)
First Name Middle Name Last Name

Part	8:	List Certain Fina	ncial Ac	counts, Instru	ments, Saf	e Deposit Bo	oxes, and Sto	orage Units		
20.	mov Inclu	ed, or transferred?	? gs, money	market, or other	financial acco			s held in your name, or ares in banks, credit unio		
		No Yes. Fill in the deta	ails.							
		ress. Tim in the deta	ano.		Last 4 c	ligits of accou		of account or ument	Date account was closed, sold, moved, or	Last balance before closing or transfer
									transferred	
		Person Who Was P	aid		_ XXXX-		느	Checking Savings		
		Number Street			_			Noney market		
					_			Brokerage		
		City	State	Zip Code	_			Other		
	-	Oity	Otate	Zip Oode	_ XXXX-			Checking		
		Person Who Was P	aid		_ /////			Savings		
		Number Street			_			Money market		
					_		느	3 Brokerage		
		City	State	Zip Code	_			Other		
		er valuables? No Yes. Fill in the deta	ails.		Who else	had access to	it?	Describe the cont	ents	Do you still have it?
		Name of Financial I	Institution		Name			-		No
		Number Street			Number	Street		-		Yes
					City	State	Zip Code	-		
		City S	State	Zip Code						
22.	Hav	e vou stored prope	ertv in a st	orage unit or pl	ace other tha	an vour home	within 1 vear l	pefore you filed for bank	kruptcv?	
		No	,			,				
	Ħ	Yes. Fill in the deta	ails.							
	_				Who else l	nad access to	it?	Describe the conto	ents	Do you still have it?
		Name of Storage F	acility		Name			-		No
		Number Street	,			Stroot		-		Yes
						Street		_		_
					City	State	Zip Code			
		City S	State	Zip Code						

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Swinson Debtor 1 Lisa Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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Debt	or 1	Lisa First Name	M. Middle Na	me	Swinson Last Name	Case n	umber <i>(if k</i>	nown)	
26.	Have	e you been a party	y in any judicial or ac	Iministrative	e proceeding under	any environmental	law? Inc	lude settlements and	orders.
	✓	No							
		Yes. Fill in the det	ails.						
				Cou	rt or agency		Nature of	the case	Status of the case
		Case title							
				Cou	rt Name				Pending
									On appeal
		Case number		Num	nberStreet				Concluded
				City	State	Zip Code			
Part	11:	Give Details Ab	oout Your Busines	s or Conne	ections to Any Bus	siness			
					,				
27.	With	nin 4 years before	you filed for bankrup	tcy, did you	own a business or l	nave any of the foll	owing co	nnections to any busir	iess?
		A sole propri	etor or self-employed	I in a trade,	profession, or other	activity, either full-f	time or pa	art-time	
		A member of	a limited liability com	pany (LLC)	or limited liability pa	rtnership (LLP)			
		A partner in a	a partnership						
		An officer, dir	rector, or managing e	executive of	a corporation				
		An owner of a	at least 5% of the vol	ing or equity	y securities of a corp	oration			
		No. None of the a	bove applies. Go to	Part 12.					
	Ħ		at apply above and f		ails below for each b	usiness.			
					Describe the natu			Employer Identification	on number Do not
								include Social Securi	
		Business Name						EIN:	
		Baomood Hamo							
		Number Street						Dates business existe	d
		City	State Zip C	rodo.	Name of accounta	int or bookkeeper		For any Tra	
		Oity	State Zip C	ode				From To _	
					Describe the natu	re of the business		Employer Identification include Social Security	
								EIN:	,
		Business Name						LIIV.	
		Number Street						Dates business existe	e d
					Name of accounta	int or bookkeeper			
		City	State Zip C	ode				From To	
					Describe the natu	re of the business		Employer Identification	on number Do not
								include Social Securi	ty number or ITIN.
		Business Name						EIN:	
		Number Street			Nome of account	ant an beeld		Dates business existe	:d
		City	State Zip C	ode	Name of accounta	ль ог рооккеерег		Erom T-	
		Oity	σιαιο Ζιρ C	oue				From To _	

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Debt	or 1 Lisa	M.	Swinson	Case number (if known)
	First Name	Middle Name	Last Name	
28.	Within 2 years before y creditors, or other part No Yes. Fill in the deta	ties.	ou give a financial stateme	ent to anyone about your business? Include all financial institutions,
	_		Date issued	
	Name		MM/DD/YYYY	
	Number Street		_	
	City	State Zip Code	_	
Part	12: Sign Below			
tı	rue and correct. I under I bankruptcy case can r	rstand that making a false sta	atement, concealing prope	ents, and I declare under penalty of perjury that the answers are rty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	x /s/ L	isa Swinson		×
	Signatui	re of Debtor 1		Signature of Debtor 2
	Date 3	/6/2017		Date 3/6/2017
D	Did you attach additiona	I pages to Your Statement of	f Financial Affairs for Indivi	duals Filing for Bankruptcy (Official Form 107)?
Ŀ	√ No			
Ē	Yes			
D	Did you pay or agree to p	pay someone who is not an a	ttorney to help you fill out	pankruptcy forms?
Ŀ	✓ No			
	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice,

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Fill in this information to identify your case:					
Debtor 1	Lisa	M.	Swinson		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		Northern	District of Illinois (State)		
Case number (If known)			(,		

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Did you claim the property Identify the creditor and the property that is collateral What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: PNC Bank Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Auto Loan - 2014 GMC Sierra Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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Debtor	Lisa	M.	Swinson	Case number (if
1	First Name	Middle Name	Last Name	known)
Part 2:	List Your Unexpired Perso	onal Property Leases		
For any informat	unexpired personal property le	ease that you listed in Sc ate leases. Unexpired lea	ises are leases that are still	racts and Unexpired Leases (Official Form 106G), fill in the till in effect; the lease period has not yet ended. You may . § 365(p)(2).
Des	cribe your unexpired personal	property leases		Will the lease be assumed?
Less	sor's name:			No Yes
	cription of leased perty:			
Less	sor's name:			□ No □ Yes
	cription of leased perty:			
Less	sor's name:			□ No □ Yes
	cription of leased perty:			
Less	sor's name:			No Yes
	cription of leased perty:			
Less	sor's name:			No Yes
	cription of leased perty:			
Less	sor's name:			□ No □ Yes
	cription of leased perty:			
Less	sor's name:			□ No □ Yes
	cription of leased perty:			
Part 3:	Sign Below			
Unde			intention about any proper	erty of my estate that secures a debt and any personal
40			44	
	s/ Lisa Swinson		Signature	of Debtor 2
SIÓ	gnature of Debtor 1		Signature	e of Debtor 2
Da	ate 3/6/2017 MM/DD/YYYY		Date 3/6/ MM	6/2017 M/DD/YYYY

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

		Northern District of	Illinois	
n re	Lisa M. Swinson		Case No.	
_	Debtor			(If known)
			Chapter	Chapter 7
1	DISCLOSURE OF (. Pursuant to 11 U.S.C. § 329(a) and Fe			
	compensation paid to me within one y rendered or to be rendered on behalf	year before the filing of the petition	on in bankruptcy, or agreed to	be paid to me, for services
	For legal services, I have agreed to accommod to accommod to accommod to the services of the s	cept		\$500.00
	Prior to the filing of this statement I h	ave received		\$500.00
	Balance Due			\$0.00
2	. The source of the compensation paid	to me was:		
	J Debtor	Other (specify)		
3	. The source of the compensation paid	to me is:		
	✓ Debtor	Other (specify)		
4	I have not agreed to share the abomembers and associates of my la		n any other person unless they	y are
	I have agreed to share the above- members or associates of my law the people sharing in the compen	firm. A copy of the agreement, to		
5	. In return for the above-disclosed fee,	I have agreed to render legal serv	ice for all aspects of the bank	ruptcy case, including:
6	. By agreement with the debtor(s), the a	above-disclosed fee does not inc	lude the following services:	
		CERTIFICATIO	N	
	I certify that the foregoing is a complete tor(s) in this bankruptcy proceedings.	e statement of any agreement or a	arrangement for payment to m	ne for representation of the
	3/6/2017		/s/ Dan Springer	
	Date		Signature of Attorney	
			Springer Law	
			Name of law firm	

Desc Main 815.312.4725

CHAPTER 7 RETAINER AGREEMENT

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- The attorney fees for the Chapter 7 bankruptcy are \$500. This is a flat fee arrangement, and does not
 include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law
 Firm will not charge you for additional work. However, if you refuse to cooperate, or fail to provide
 information as requested by our attorney, your case may be closed.
- 2. Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I assign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- 3. I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- 4. I understand that I may not be able to protect all of my property. The bankruptcy code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold. Additionally, if my income is too high, or if my income is not offset enough by my expenses, I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- 5. I understand that not all of my debts may be discharged in a Chapter 7 bankruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fraud, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- 6. I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not represent me in any other case or legal matter, unless agreed to in a separate retainer agreement. This includes adversary proceedings that may fall under the bankruptcy case. This agreement does not include representation in such adversary proceedings.
- 7. I understand that all money paid towards attorney fees is non-refundable. I understand that once I pay Springer Law, that Springer Law begins work on my case. I understand that the majority of bankruptcy work is done prior to the filing of the case, and because of this the fees are earned even before the filing of the case.
- 8. I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer Law Firm and consult on the impact such action will have on my bankruptcy.
- 9. I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NOT being filed, or if filed, possibly dismissed. If my case is dismissed, I understand that I will have to pay to have my case re-opened by Springer Law Firm.
- 10. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

Dated: 3/4/2017	
Signature: Lisa W. Swinson	Attorney Signature:
Print Name: Lisa We Swinson	Attorney Print: \\ \Lambda \sim \forall \rangle \sigma \forall

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Swinson, Lisa M.	Case No	Case No.		
Debtor(s)		Odse No.	Case NO		
		Chapter.	Chapter7		
	VERIFICA	ATION OF CREDITOR MAT	TRIX		
Th knowledge	ne above named Debtors hereby verify t e.	hat the attached list of creditors is tr	rue and correct to the best of their		
Date:	3/6/2017	/s/ Swinson, Lis Swinson, Lisa N Signature of Det	1.		

PNC Bank PO Box 535230 Attn: Bankruptcy Dept. PITTSBURGH, PA, 15253

Citicards CBNA PO Box 6241 Attn: Bankruptcy Dept. SIOUX FALLS, SD, 57117

GECRBPAYPALSMARTCONN PO Box 965005 Attn: Bankruptcy Dept. ORLANDO, FL, 32896

SYNCB/Wal-Mart PO Box 965024 El Paso, TX, 79998

Comenity/Buckle P.O. Box 182789 COLUMBUS, OH, 43218

Barclays Bank Delaware PO Box 8803 WILMINGTON, DE, 19899

Chase Bank USA PO Box 15298 Attn: Bankruptcy Dept. WILMINGTON, DE, 19850

First Northern Credit Union 230 W Monroe St Suite2850 Attn: Bankruptcy Dept. CHICA, IL, 60606

SYNCB/Dicks Sporting Goods P.O. Box 965005 ORLANDO, FL, 32896

Syncb/Sams Club PO Box 965005 ORLANDO, FL, 32896